

NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTECTION
AIR QUALITY PERMITTING

GENERAL PERMIT REGISTRATION FORM

EMERGENCY GENERATOR

SECTION A: FACILITY PROFILE

Facility ID Number _____ Facility Name _____

Street Address

Address Line 1 _____
Address Line 2 _____
Address Line 3 _____
City _____ State _____ Zip _____

Mailing Address

☐ Check if same as street address above

Address Line 1 _____
Address Line 2 _____
Address Line 3 _____
City _____ State _____ Zip _____

County Where Facility Is Located _____

Location Description

**Mailing Instructions
and Information:**

Mail Registration Form & Fee to:

NJDEP - Air Quality Permitting Program
P.O. Box 27
Trenton, New Jersey 08625

Fee Amount: \$250

Make checks payable to "Treasurer, State of NJ"

For Assistance, Please call:

(800) 441-0065 within NJ

(609) 292-6716 outside NJ

Industry Information

Primary SIC _____

Secondary SIC _____

Facility Contact

Contact Person (check one or check both if owner is the operator) ☐ Owner ☐ Operator

Name	_____	Organization	_____
Title	_____	Organization Type	_____
Phone	() _____	NJ EIN	_____
Fax	() _____	Mailing Address	_____
Other	() _____	Address Line 2	_____
Type	_____	Address Line 3	_____
E-mail	_____	City	_____ State _____ Zip _____

SECTION B: REASON FOR APPLYING (Check All That Apply)

- ☐ New Emergency Generator
☐ Existing Unpermitted Emergency Generator
☐ Change In Permitting Option
From EG-_____ To EG-_____
☐ Other (Explain) _____

Previous Permit or Certificate Number _____

SECTION C: EQUIPMENT INVENTORY

Facility Designation Of Emergency Generator	Equipment NJID #	Installation Date (mm/dd/yr)	Last Modification Date (mm/dd/yr)
	E-		

SECTION D: PERMITTING OPTIONS

This Registration Form is for **one emergency generator only**. Indicate how this generator is being registered by selecting one General Permit Number from one of the 4 options listed below. **Only ONE box** may be checked in the table below.

Compliance shall be demonstrated as follows:

Options A & B: Totalizing hour meter and a totalizing fuel flow meter

Options C & D: Totalizing hour meter

Print The General Permit Number Selected Below: EG-_____

OPTION A	OPTION B	OPTION C	OPTION D
<input type="checkbox"/> EG-A1	<input type="checkbox"/> EG-B1	<input type="checkbox"/> EG-C1	<input type="checkbox"/> EG-D1
<input type="checkbox"/> EG-A2	<input type="checkbox"/> EG-B2	<input type="checkbox"/> EG-C2	<input type="checkbox"/> EG-D2
<input type="checkbox"/> EG-A3	<input type="checkbox"/> EG-B3	<input type="checkbox"/> EG-C3	<input type="checkbox"/> EG-D3
<input type="checkbox"/> EG-A4	<input type="checkbox"/> EG-B4	<input type="checkbox"/> EG-C4	<input type="checkbox"/> EG-D4
<input type="checkbox"/> EG-A5	<input type="checkbox"/> EG-B5	<input type="checkbox"/> EG-C5	<input type="checkbox"/> EG-D5
<input type="checkbox"/> EG-A6	<input type="checkbox"/> EG-B6	<input type="checkbox"/> EG-C6	<input type="checkbox"/> EG-D6
<input type="checkbox"/> EG-A7	<input type="checkbox"/> EG-B7	<input type="checkbox"/> EG-C7	<input type="checkbox"/> EG-D7
<input type="checkbox"/> EG-A8	<input type="checkbox"/> EG-B8	<input type="checkbox"/> EG-C8	<input type="checkbox"/> EG-D8
<input type="checkbox"/> EG-A9	<input type="checkbox"/> EG-B9	<input type="checkbox"/> EG-C9	<input type="checkbox"/> EG-D9
<input type="checkbox"/> EG-A10	<input type="checkbox"/> EG-B10	<input type="checkbox"/> EG-C10	<input type="checkbox"/> EG-D10
	<input type="checkbox"/> EG-B11	<input type="checkbox"/> EG-C11	<input type="checkbox"/> EG-D11
	<input type="checkbox"/> EG-B12	<input type="checkbox"/> EG-C12	<input type="checkbox"/> EG-D12
	<input type="checkbox"/> EG-B13	<input type="checkbox"/> EG-C13	
		<input type="checkbox"/> EG-C14	
		<input type="checkbox"/> EG-C15	
		<input type="checkbox"/> EG-C16	
		<input type="checkbox"/> EG-C17	
		<input type="checkbox"/> EG-C18	

SECTION E: CERTIFICATION

"I certify under penalty of law that I believe the information provided in this document is true, accurate, and complete. I am aware that there are significant civil and criminal penalties, including the possibility of fine or imprisonment or both, for submitting false, inaccurate or incomplete information."

_____ Name of Individual With Direct Knowledge	_____ Title	_____ Signature	_____ Date
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"I certify under penalty of law that I have personally examined and am familiar with the information submitted in this document and all attached documents and, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate and complete. I am aware that there are significant civil and criminal penalties, including the possibility of fine or imprisonment or both, for submitting false, inaccurate or incomplete information."

_____ Name of Responsible Official	_____ Title	_____ Signature	_____ Date
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For Department Use Only	Activity # _____	Fee _____
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INSTRUCTIONS FOR COMPLETING THE REGISTRATION FORM EMERGENCY GENERATOR

SECTION A: FACILITY PROFILE

Facility (ID Number & Name) - Enter the New Jersey air pollution facility identification number (ID) followed by the facility name for which the General Permit is being registered. The ID is a five-digit number assigned by the New Jersey Department of Environmental Protection. If you have other air pollution control permits for your facility, you can obtain the ID number from those permits. If you do not have any air pollution control permits, leave this space blank. Your facility name is the one registered with the New Jersey Secretary of State, under which your facility does business.

Street Address - Enter the address of the facility where it is physically located.

Mailing Address - Enter the facility's mailing address. If it is the same as the facility location, check the box provided.

Mailing Instructions & Information - Once the General Permit Registration Form has been completed, it should be mailed along with the appropriate fee(s) to the New Jersey Department of Environmental Protection at the address listed on the front page of the Registration form. The fee is \$250.00 for the emergency generator being registered. Make checks payable to "Treasurer, State of New Jersey".

County - Enter the county in which the facility is located (**not the mailing address county**).

Location Description - Describe the facility's location if it is difficult to find using the street address. If you have to give a visitor directions to your facility, consider showing them here. (*example*: "Two miles down the access road that leaves state highway 29 at mile marker 10.")

Industry Information - Enter the facility's four-digit primary and secondary (if any) Standard Industrial Classification Codes (SIC). Use the codes registered with the US Department of Labor. You may also refer to the Standard Industrial Classification Manual from the U.S. Office of Management and Budget.

Facility Contact - Check the box indicating the facility contact person for this General Permit Registration. If the owner and operator are the same, check both boxes. Enter the name, title, phone and fax numbers, other phone numbers and type of number (*example*: pager, toll free, cell phone), e-mail address, the organization that the contact person works for, the type of organization (federal, local, public, private, state or utility), the New Jersey Employer Identification Number (EIN) and the contact mailing address.

SECTION B: REASON FOR APPLYING

This section of the General Permit Registration Form provides the Department with the reason the General Permit Registration Form is being submitted.

New Emergency Generator - Check this box if this emergency generator has not been installed as of the filing of this Registration Form.

Existing Unpermitted Emergency Generator - Check this box if this is an existing emergency generator that is currently not registered with the Department.

Change In Permitting Option - Check this box if the General Permit Registration Form is being submitted to change a permitting option (listed in Section D of the Form) of a previously registered emergency generator. Provide the current permit number in the space provided.

Other - Check this box if the General Permit Registration Form is being submitted for a reason other than those described

above and provide an explanation. Example: Modification as a result of an enforcement action.

Previous Permit or Certificate Number - If the facility is registering an emergency generator that had a previous permit or certificate, list the previous permit or certificate number.

SECTION C: EQUIPMENT INVENTORY

Facility Designation of Emergency Generator - Enter the name by which the facility identifies the emergency generator. (*example*: Generator # 5)

Equipment NJID # - A facility may do either one of the two following: **1-** Enter a unique 6 digit identification number (*example*: E-000010) for the generator covered by this General Permit. Once a number is used to identify the generator or any another piece of equipment at the facility, the same number cannot be used to identify any other piece of equipment at the facility. (**Note:** If the 6 digit identification number the facility enters is incorrect or conflicts with any number registered with the Department, then the Department will assign the next available number for the equipment); **2-** Leave this number blank and the Department will assign the next available unique 6 digit identification number for the generator covered by this General Permit. The Department will not assign the same two numbers for any piece of equipment registered for the facility.

Installation Date - Enter the installation date (month, day, year) of the emergency generator.

Last Modification - Enter the date (month, day, year) the emergency generator was last modified.

SECTION D: PERMITTING OPTIONS

The table in this section lists four options. A facility registering their emergency generator under this General Permit must select a General Permit Number from the options by checking **only ONE** box. The General Permit Number chosen corresponds to a fuel or hour restriction (which includes a potential-to-emit for each criteria pollutant) the facility is willing to accept as a permit limit. In the space provided, print the General Permit Number selected from the options table. See the General Permit for option restrictions and limitations.

(NOTE: The maximum heat input rate to the emergency generator can be obtained from the generator manufacturer. The following conversions are provided to assist applicants.)

Natural Gas Flow (MMCF/Hr) x 1020 = MMBTU/Hr

Diesel Fuel Flow (MMGal/Hr) x 142,000 = MMBTU/Hr

SECTION E: CERTIFICATION

Print or type the name and title of person, submit with original signature and date the application in the spaces provided.

Individual with Direct Knowledge - Individual listed as the contact person, or any person with direct knowledge of and responsibility for the information contained in the General Permit Registration Form. This may or may not be the same person who signs as the Responsible Official defined below.

Responsible Official - A facility official responsible for the General Permit Registration. A Responsible Official as defined in N.J.A.C. 7:27-1.4 is as follows:

- For a corporation: a president, secretary, treasurer, or vice-president of the corporation; any other person who performs similar policy or decision making functions for the corporation; or a duly authorized representative responsible for the overall operation of a facility (plant manager, etc.).
- For a partnership: a general partner.
- For a sole proprietorship: the proprietor
- For a government agency: either a principal executive officer or ranking elected official.